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CONFIRMATION NO. 6603

<b>SERIAL NUMBER</b> 10/521,044	<b>FILING OR 371(c) DATE</b> 12/07/2005 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> OMA003-US1
<b>APPLICANTS</b> Walid Nagib Aboul-Hosn, Fair Oaks, CA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/18638 06/11/2003 which claims benefit of 60/388,113 06/12/2002 and claims benefit of 60/431,174 12/04/2002				
<b>** FOREIGN APPLICATIONS *****</b> <div style="text-align: center;">** SMALL ENTITY **</div>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 22	<b>TOTAL CLAIMS</b> 15
		<b>INDEPENDENT CLAIMS</b> 1		
<b>ADDRESS</b> Jonathan Spangler 2875 Kalmia Place San Diego ,CA 92104				
<b>TITLE</b> Percutaneously introduced blood pump and related methods				
<b>FILING FEE RECEIVED</b> 365	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	